

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MM	7639	
O.I.P.E. CLASSIFIER	MM	10	
FORMALITY REVIEW		49452	02/02/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	1	1	12-14-93
2	1	1	✓
3	1	1	✓
4	1	1	✓
5	1	1	✓
6	0	1	
7	1	1	✓
8	1	1	✓
9	1	1	✓
10	0	1	
11	1	1	
12	1	1	
13	1	1	
14	1	1	
15	1	1	✓
16	0	1	
17	1	1	✓
18	1	1	✓
19	1	1	✓
20	1	1	✓
21	1	1	✓
22	0	1	
23	0	1	
24	1	1	✓
25	0	1	
26	1	1	✓
27	0	1	
28	1	1	✓
29	0	1	
30	1	1	
31	1	1	
32	1	1	
33	1	1	
34	1	1	
35	1	1	✓
36	1	1	✓
37	1	1	✓
38	1	1	✓
39	2	1	
40	1	1	
41	1	1	
42	1	1	
43	1	1	
44	1	1	
45	1	1	
46	1	1	
47	1	1	
48	1	1	
49	1	1	
50	1	1	✓

Claim	Final	Original	Date
51	1	1	N
52	1	1	
53	1	1	
54	1	1	
55	1	1	
56	1	1	
57	1	1	
58	1	1	
59	1	1	
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100	1	1	

Claim	Final	Original	Date
101	1	1	
102	1	1	
103	1	1	
104	1	1	
105	1	1	
106	1	1	
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140	1	1	
141	1	1	
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143	1	1	
144	1	1	
145	1	1	
146	1	1	
147	1	1	
148	1	1	
149	1	1	
150	1	1	

If more than 150 claims or 10 actions
staple additional sheet here

Best Available Copy